

19989



200307170131

Skagit County Auditor

7/17/2003 Page

1 of

5 4:05PM

RETURN ADDRESS

Carole Woodmansee
1810 Olive Street
Mount Vernon, WA 98274

STATE OF WASHINGTON Department of LICENSING **MANUFACTURED HOME APPLICATION** **PLEASE CHECK ONE**

TITLE ELIMINATION
 TRANSFER IN LOCATION
 REMOVAL FROM REAL PROPERTY

Anyone who knowingly makes a false statement of a material fact is guilty of a felony, and upon conviction may be punished by a fine, imprisonment, or both. (RCW 46.12.210)

1 MANUFACTURED HOME

TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)
2146057	1999	Skyline	42X48	67910744L

2 LAND LEGAL DESCRIPTION ON PAGE _____

MANUFACTURED HOME WILL BE AFFIXED REMOVED

REAL PROPERTY TAX PARCEL NUMBER: P113662

LOT	BLOCK	PLAT NAME	SECTION/TOWNSHIP/RANGE
1/2 L547 & L548		Bakerview West	

3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE _____

COUNTY NUMBER	NUMBER OF REGISTERED OWNERS	NUMBER OF LEGAL OWNERS
	5	5

NAME OF REGISTERED OWNER: Carole R. Woodmansee

NAME OF ADDITIONAL REGISTERED OWNER: Laura Dean

ADDRESS: 1810 Olive St. Mt. Vernon, WA 98274

NAME OF LEGAL OWNER: Carole R. Woodmansee

NAME OF ADDITIONAL LEGAL OWNER: Laura Dean

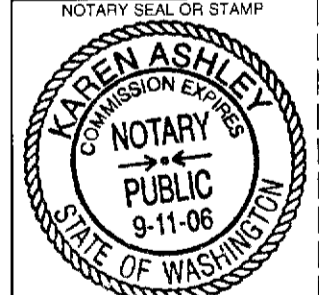
ADDRESS: 1810 Olive Street Mt. Vernon, WA 98274

GRANTEE
NAME: Carole R. Woodmansee

I DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY THAT I / WE AM/ARE THE REGISTERED OWNER(S) OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE:

Signature of Registered Owner and Title, IF APPLICABLE: Carole R. Woodmansee

Signature of Additional Registered Owner and Title, IF APPLICABLE: Laura Dean by Carole Woodmansee ASH



NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE

State of Washington County of Skagit Signed or attested before me on 7/16/03

by Carole R. Woodmansee Signature: Karen Ashley
PRINT NAME OF REGISTERED OWNER NOTARY OR AGENT

by Susan G. Moon Karen Ashley
PRINT NAME OF REGISTERED OWNER PRINTED NAME OF NOTARY

Title _____ AND: County/Office No. OR Dealer No. OR Notary Expiration Date 9/11/06
DEALERSHIP POSITION/AGENT/NOTARY

4 TITLE COMPANY CERTIFICATION

I certify that the legal description of the land and ownership is true and correct per the real property records.

NAME (TYPED OR PRINTED) _____ TITLE COMPANY / PHONE NUMBER _____

SIGNATURE / POSITION _____ DATE _____

Finalize this application with a Licensing Agent within 10 calendar days of the date Title Company Representative signs.

5 BUILDING PERMIT OFFICE CERTIFICATION

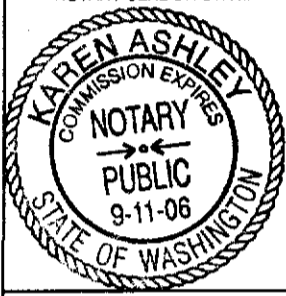
I certify that: the manufactured home has been affixed to the real property as described. a building permit has been issued for this purpose and the attachment will be inspected upon completion.

NAME (TYPED OR PRINTED): Barrie Kenning BLDG PERMIT OFFICE/PHONE #: 336-6264 BLDG PERMIT #: 14654

SIGNATURE / POSITION: Barrie Kenning (Bldg. Inspector) DATE: 7-17-03

Continued legal owners in P.O.A.
Laura J. Dean by Carole Woodmansee P.O.A.
 Laura Dean
Peggy J. Aiello by Carole Woodmansee P.O.A.
 Peggy J. Aiello
Robert J. Dean by Carole Woodmansee P.O.A.
 Robert J. Dean

See attached Exhibit "A" for notary acknowledgement of legal & registered owners

6 SIGNATURE OF LEGAL OWNER							
SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY.							
Signature of Legal Owner and Title, IF APPLICABLE <i>Carole R. Woodmansee</i>							
Signature of Additional Legal Owner and Title, IF APPLICABLE <i>Susan G. Moon</i>							
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE					
		State of Washington		Signed or attested			
		County of <i>Skagit</i>		before me on <i>7/16/03</i>			
		by <i>Carole R. Woodmansee</i>		Signature <i>Karen Ashley</i>		NOTARY OR AGENT	
		PRINT NAME OF LEGAL OWNER		PRINTED NAME OF NOTARY			
by <i>Susan G. Moon</i>		County/Office No. OR		Dealer No. OR			
PRINT NAME OF LEGAL OWNER		AND: Notary Expiration Date					
Title		DEALERSHIP POSITION/AGENT/NOTARY					
7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)							
<p>The East 1/2 of Lot 47 and all of Lot 48, "Plat of Bakerview West" as per plat recorded in Volume 17 of Plats, pages 13 through 16, inclusive, records of Skagit County, Washington. Situate in the County of Skagit, State of Washington.</p>							
8 DEALER'S REPORT OF SALE							
I CERTIFY THAT THIS INFORMATION IS CORRECT. THE VEHICLE IS CLEAR OF ENCUMBRANCES EXCEPT AS SHOWN. ANY REQUIRED SALES TAX HAS BEEN COLLECTED.							
DEALER NAME (TYPED OR PRINTED)			WA DEALER NUMBER	DATE OF SALE			
PURCHASE PRICE	TAX JURISDICTION/TAX RATE	DEALER'S AUTHORIZED SIGNATURE					
<input type="checkbox"/> USE TAX EXEMPT Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery).							
9 COUNTY AUDITOR/AGENT LICENSING OFFICE APPROVAL: (Not for use by Subagents)							
I certify that the above application appears to have been completed correctly, and the applicant has sufficient documentation to proceed with the recording of this form.							
NAME (TYPED OR PRINTED)			COUNTY OFFICE/VES OPERATOR NUMBER				
<i>Charrie Willis</i>			<i>2901-21</i>				
SIGNATURE			DATE				
<i>Charrie Willis</i>			<i>7/17/03</i>				
10 TITLE FEES							
FILING FEE	APPLICATION	MOBILE HOME FEE	ELIMINATION FEE	USE TAX	SUBAGENT FEES		
					TOTAL FEES & TAX		
<p>IMPORTANT: Once the application has been approved by the County Auditor / Vehicle Licensing Office, take your application form to the County Recording Office. Retain proof of the recording fees paid. If the Recording Office retains your original application form, obtain a certified copy of the recorded form.</p> <p>APPLICANTS: Once recorded, you must return to a Vehicle Licensing office to file the Manufactured Home Application, paying all required fees. Vehicle licensing subagents charge a service fee.</p> <p>For full instructions on completing this form for Title Elimination, Removal from Real Property or Transfer in Location, see form TD-420-730, Manufactured Home Application Instructions.</p>							

The Department of Licensing has a policy of providing equal access to its services. If you need special accommodation, please call 1-800-892-8885



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OWNERSHIP

Use this form when there is not enough room on TD-420-729 (Manufactured Home Application) to provide the owner(s) names. This form must be recorded with the Manufactured Home Application and a certified copy presented to a vehicle licensing agency as part of the supporting documentation for a Manufactured Home application.

CHECK THE TYPE OF APPLICATION:

- Title Elimination
- Removal From Real Property
- Transfer In Location

PROPERTY TAX PARCEL NUMBER:

P 113662

ADDITIONAL GRANTOR(S) REGISTERED OWNER(S)	
NAME OF REGISTERED OWNER <i>Peggy Aiello</i>	DOL CUSTOMER ACCOUNT NUMBER
NAME OF REGISTERED OWNER <i>Susan Moon</i>	DOL CUSTOMER ACCOUNT NUMBER
NAME OF REGISTERED OWNER <i>Robert Dean</i>	DOL CUSTOMER ACCOUNT NUMBER
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER

Anyone who knowingly makes a false statement of a material fact is guilty of a felony, and upon conviction may be punished by a fine, imprisonment, or both. (RCW 46.12.210)
I DO SOLEMNLY ATTEST UNDER PENALTY OF PURJURY THAT I/WE AM/ARE THE REGISTERED OWNER(S) OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE:

SIGNATURE OF REGISTERED OWNER(S)	
SIGNATURE OF REGISTERED OWNER <i>Peggy Aiello by Carole Woodmansee B.O.A</i>	DATE <i>7-16-03</i>
SIGNATURE OF REGISTERED OWNER <i>Susan S. Moon</i>	DATE <i>7-16-03</i>
SIGNATURE OF REGISTERED OWNER <i>Robert J. Dean by Carole Woodmansee B.O.A</i>	DATE <i>7-16-03</i>
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE

NOTARY SEAL OR STAMP	NOTARIZATION / CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE State of Washington County of _____ Signed or attested before me on _____ by _____ Signature Printed Name of Applicant Notary or Agent _____ Printed name of Notary _____ Title Dealer No. OR Dealership Position/Agent/Notary AND: County/Office No. OR Notary Expiration Date
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MANUFACTURED HOME APPLICATION ADDITIONAL ATTACHMENT

Legal Description of Land

Use this form when a legal description from the county is not legible, and/or a statutory warranty deed is not available, to provide the legal description of the land. This form must be recorded with the Manufactured Home Application and a certified copy presented to a vehicle licensing agency as part of the supporting documentation for a Manufactured Home application.

CHECK THE TYPE OF APPLICATION:

- Title Elimination
- Removal From Real Property
- Transfer In Location

LAND: PROPERTY TAX PARCEL NUMBER:

LEGAL DESCRIPTION:

The East 1/2 (as measured along the South line) of Lot 47 and Lot 48, "PLAT OF BAKERVIEW WEST," as per plat recorded in Volume 17 of Plats, pages 13 through 16, inclusive, records of Skagit County, Washington.



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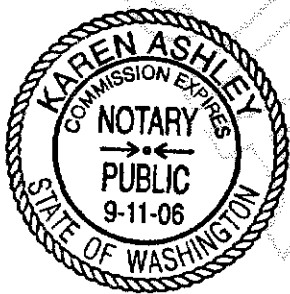
ACKNOWLEDGMENT

ATTACHED TO and made a part
of Mobile Home Title Elimination

STATE OF Washington }
County of Skagit } SS:

On this 16th day of July, 2003 before me personally appeared Carole R. Woodmansee, to me known to be the individual described in and who executed the foregoing instrument for herself and as Attorney in Fact for Laura Dean, Peggy J. Aiello, Robert J. Dean and acknowledged that she signed and sealed the same as her free and voluntary act and deed for her self and also as her free and voluntary act and deed as Attorney in Fact for said principal for the uses and purposes therein mentioned, and on oath stated that the Power of Attorney authorizing the execution of this instrument has not been revoked and that the said principal is now living, and is not incompetent.

Given under my hand and official seal the day and year last above written.
(Seal)



Karen Ashley

Karen Ashley
Notary Public in and for the State of Washington
Residing at Sedro-Woolley
My appointment expires: 9/11/06



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